



EDMUND G. BROWN JR.
GOVERNOR

MATTHEW RODRIGUEZ
SECRETARY FOR
ENVIRONMENTAL PROTECTION

State Water Resources Control Board

Division of Drinking Water

October 4, 2017

System No. 3110049
Certified Mail
7012 3460 0003 1113 0666

Rick Dewante, Owner
Tahoe Park Water Company – Skyland/Nielsen
5000 Windplay Drive, Suite 4
El Dorado Hills, CA 95762

TRANSMITTAL OF CITATION NO. 01-02-17C-018

Dear Mr. Dewante:

The State Water Resources Control Board (Board) Division of Drinking Water has issued the Tahoe Park Water Company – Skyland/Nielsen water system a citation, which is attached.

Any person who is aggrieved by an order or decision issued by the deputy director of the Division of Drinking Water under Article 8 (commencing with Health and Safety Code Section 116625) or Article 9 (commencing with Health and Safety Code Section 116650), of the Safe Drinking Water Act (Chapter 4, Part 12, Division 104, of the Health and Safety Code) may file a petition with the State Board for reconsideration of the order or decision. The enclosed citation contains the relevant statutory provisions for filing a petition for reconsideration (Health and Safety Code Section 116701).

Petitions must be received by the State Board within 30 days of the issuance of the order or decision by the Deputy Director. The date of issuance is the date when the Division of Drinking Water mails a copy of the order or decision. If the 30th day falls on a Saturday, Sunday, or state holiday, the petition is due the following business day. Petitions must be received by 5:00 p.m. Information regarding filing petitions may be found at: http://www.waterboards.ca.gov/drinking_water/programs/petitions/index.shtml

If you have any questions, please contact Michael Burgess at (530) 224-6506 or me at (530) 224-4800.

Stephen W. Watson, P.E.
Lassen District Engineer
DRINKING WATER FIELD
OPERATIONS BRANCH

Enclosure

cc: Richard L. Hinrichs, Chief, DDW-Northern California Section
Placer County Department of Environmental Health

3110049/Enforcement
Aug 2017 Cit Ltr/mtb

FELICIA MARCUS, CHAIR | EILEEN SOBECK, EXECUTIVE DIRECTOR

364 Knollcrest Drive, Suite 101, Redding, CA 96002 | www.waterboards.ca.gov

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STATE OF CALIFORNIA
STATE WATER RESOURCES CONTROL BOARD
DIVISION OF DRINKING WATER

TO: Tahoe Park Water Company – Skyland/Nielsen
5000 Windplay Drive, Suite 4
El Dorado Hills, CA 95762

Attn: Richard Dewante, Owner

CITATION FOR VIOLATION OF
CALIFORNIA CODE OF REGULATIONS,
TITLE 22, SECTIONS 64426 and 64426.1

WATER SYSTEM NO. 3110049
CITATION NO. 01-02-17C-018
Issued on October 4, 2017

Section 116650 of the California Health and Safety Code authorizes the issuance of a citation to a public water system for violation of the California Safe Drinking Water Act (Health and Safety Code, Division 104, Part 12, Chapter 4, commencing with Section 116270) (hereinafter "California SDWA"), or any regulation, standard, permit or order issued or adopted thereunder.

1 The State Water Resources Control Board (hereinafter "State Board"), acting by and through
2 its Division of Drinking Water (hereinafter, "Division") and the Deputy Director for the Division
3 (hereinafter, "Deputy Director"), hereby issues a citation to the Tahoe Park Water Company –
4 Skyland/Nielsen (hereinafter, "Tahoe Park"), located on the west shore of Lake Tahoe on the
5 west side of Highway 89 between Sunnyside and Tahoe Pines, for violation of California Code
6 of Regulations (CCR), Title 22, Sections 64426 and 64426.1.

7
8 **APPLICABLE AUTHORITIES**

9 **Section 116650 of California Health and Safety Code provides:**

10 (a) If the State Board determines that a public water system is in violation of this
11 chapter or any regulation, permit, standard, citation, or order issued or adopted thereunder, the
12 State Board may issue a citation to the public water system. The citation shall be served upon
13 the public water system personally or by certified mail. Service shall be deemed effective as of
14 the date of personal service or the date of receipt of the certified mail. If a person to whom a
15 citation is directed refuses to accept delivery of the certified mail, the date of service shall be
16 deemed to be the date of mailing.

17 (b) Each citation shall be in writing and shall describe the nature of the violation
18 or violations, including a reference to the statutory provision, standard, order, citation, permit,
19 or regulation alleged to have been violated.

20 (c) A citation may specify a date for elimination or correction of the condition
21 constituting the violation.

22 (d) A citation may include the assessment of a penalty as specified in subdivision
23 (e).

1 (e) The State Board may assess a penalty in an amount not to exceed one
2 thousand dollars (\$1,000) per day for each day that a violation occurred, and for each day that
3 a violation continues to occur. A separate penalty may be assessed for each violation.
4

5 **California Code of Regulations, Title 22, Section 64426, subsections (a) and (b),**
6 **provides in relevant part:**

7 (a) Any of the following criteria shall indicate a possible rise in bacterial count:

- 8 (1) A system collecting at least 40 samples per month has a total coliform-
9 positive routine sample followed by two total coliform-positive repeat
10 samples in the repeat sample set;
11 (2) A system has a sample which is positive for fecal coliform or *E. coli*, or
12 (3) A system fails the total coliform Maximum Contaminant Level (MCL) as
13 defined in Section 64426.1.

14 (b) When the coliform levels specified in subsection (a) are reached or exceeded, the
15 water supplier shall:

- 16 (1) Contact the Division by the end of the day on which the system is notified
17 of the test result or the system determines that it has exceeded the MCL,
18 unless the notification or determination occurs after the Division office is
19 closed, in which case the supplier shall notify the Division within 24 hours;
20 and
21 (2) Submit to the Division information on the current status of the physical
22 works and operating procedures which may have caused the elevated
23 bacteriological findings, or any information on community illness suspected
24 of being waterborne. This shall include, but not limited to:

- a. Current operating procedures that are or could potentially be related to the increase in bacterial count;
- b. Any interruptions in the treatment process;
- c. System pressure loss to less than 5 psi;
- d. Vandalism and/or unauthorized access to facilities;
- e. Physical evidence indicating bacteriological contamination of facilities;
- f. Analytical results of any additional samples collected, including source samples;
- g. Community illness suspected of being waterborne; and
- h. Records of the investigation and any action taken.

California Code of Regulations, Title 22, Section 64426.1, subsection (b) provides, in relevant part:

(b) A public water system is in violation of the total coliform MCL [maximum contaminant level] when any of the following occurs:

- (1) For a public water system which collects at least 40 samples per month, more than 5.0 percent of the samples collected during any month are total coliform-positive; or
- (2) For a public water system which collects fewer than 40 samples per month, more than one sample collected during any month is total coliform-positive; or
- (3) Any repeat sample is fecal coliform-positive or E. coli-positive; or
- (4) Any repeat sample following a fecal coliform-positive or E. coli-positive routine sample is total coliform-positive.

STATEMENT OF FACTS

The Tahoe Park Water Company operates a community water system serving a population of about 50 year-round residents on the West Shore of Lake Tahoe. The water system is currently served by a single well located in the Nielsen portion of the subdivision. Disinfection of the groundwater supply is not provided. The water system is served by two storage tanks, a 20,000-gallon redwood tank and a 60,000-gallon steel tank.

On August 8, 2017, Tahoe Park collected three routine bacteriological samples from the distribution system for analysis at the Tahoe Truckee Sanitation Agency lab. On August 10, 2017, the lab notified Tahoe Park and the Division that two of the three samples had tested positive for total coliform bacteria, but all of the samples tested absent for E. coli. Four repeat samples were collected on August 10, 2017, all of which were absent of total coliform bacteria. The Lab notified the Division of the results by email on August 18, 2017.

DETERMINATION

The Division has determined that the Tahoe Park Water Company violated Section 64426.1, Title 22 of the CCR. Specifically, Tahoe Park exceeded the total coliform MCL during the month of August 2017.

DIRECTIVES

Tahoe Park Water Company is hereby directed to take the following actions:

1. Comply with Sections 64426 and 64426.1, Title 22, of the CCR in all future monitoring periods.

- 1 2. In accordance with Title 22, Section 64426(b)(2) of the CCR, identify a possible cause
2 to the total coliform positive samples and describe corrective actions taken or needed.
3 A completed assessment must be submitted to the Division by **no later than**
4 **November 1, 2017**. Completing and submitting Attachment 'C' (Site Assessment Form)
5 fulfills the requirements of this directive.
6
7 3. Within 30 days of the issuance of this Citation, but in no case later than **November 10,**
8 **2017**, notify all persons served by Tahoe Park of the MCL violation as required by Title 22,
9 Sections 64463.4 and 64465 of the CCR. Notification shall be completed by posting the
10 notice contained in Attachment 'A' in conspicuous places within the service area and by
11 hand delivery or direct mail of the notice to all customers served by Tahoe Park. No
12 changes shall be made to Attachment 'A' unless approved by the Division.
13
14 4. Complete and return Attachment 'B' entitled "Certification of Completion of Public
15 Notification" by **November 20, 2017**. A copy of the notification that was provided to users
16 due to the total coliform MCL exceedance in August 2017 shall be included with the form.
17

18 All documents required by this Citation shall be submitted to the Division to the following
19 address:
20

21 Stephen W. Watson, P. E.
22 Lassen District Engineer
23 Division of Drinking Water
24 364 Knollcrest Drive, Suite 101
25 Redding, CA 96002

1 As used in this Citation, the date of issuance shall be the date of this Citation; and the date of
2 service shall be the date of service of this Citation, personal or by certified mail, on the water
3 system.

4
5 Nothing in this Citation relieves Tahoe Park of its obligation to meet the requirements of Health
6 and Safety Code, Division 104, Part 12, Chapter 4 (California Safe Drinking Water Act), or any
7 regulation, permit, standard or order issued or adopted thereunder.

8
9 The Division reserves the right to make such modifications to this Citation, as it may deem
10 necessary to protect public health and safety. Such modifications may be issued as
11 amendments to this Citation and shall be effective upon issuance.

12
13 **PARTIES BOUND**

14 This Citation shall apply to and be binding upon Tahoe Park Water Company – Skyland/Nielsen,
15 its officers, directors, shareholders, agents, employees, contractors, successors, and
16 assignees.

17
18 **SEVERABILITY**

19 The Directives of this Citation are severable, and Tahoe Park shall comply with each and every
20 provision thereof, notwithstanding the effectiveness of any other provision.

FURTHER ENFORCEMENT ACTION

The California SDWA authorizes the State Board to: issue a citation with assessment of administrative penalties to a public water system for violation or continued violation of the requirements of the California SDWA or any permit, regulation, or order issued or adopted thereunder including, but not limited to, failure to correct a violation identified in a citation or compliance order. The California SDWA also authorizes the State Board to take action to suspend or revoke a permit that has been issued to a public water system if the system has violated applicable law or regulations or has failed to comply with an order of the State Board; and to petition the superior court to take various enforcement measures against a public water system that has failed to comply with an order of the State Board. The State Board does not waive any further enforcement action by issuance of this citation.

10/4/17

Date

Stephen W. Watson

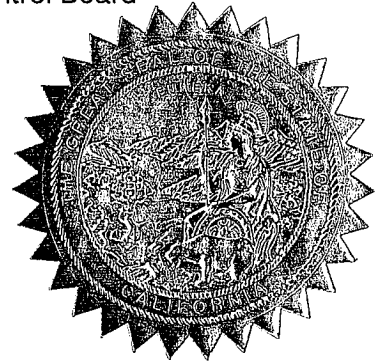
Stephen W. Watson, P.E.
Lassen District Engineer
Division of Drinking Water
State Water Resources Control Board

Attachments:

'A' Public Notice

'B' Compliance Certification Form

'C' Site Assessment Form



Certified Mail 7012 3460 0003 1113 0666

IMPORTANT INFORMATION ABOUT YOUR DRINKING WATER

Este informe contiene información muy importante sobre su agua potable.

Tradúzcalo o hable con alguien que lo entienda bien.

Tahoe Park Water Company – Skyland/Nielsen Had Levels of Coliform Bacteria Above the Drinking Water Standard

Our water system recently violated a drinking water standard. Although this is not an emergency, as our customers, you have a right to know what you should do, what happened, and what we did to correct this situation.

We routinely monitor for drinking water contaminants. We took seven samples to test for the presence of coliform bacteria during August 2017. Two of those samples showed the presence of total coliform bacteria. The standard is that no more than one sample per month may do so.

What should I do?

- **You do not need to boil your water or take other corrective actions.**
- This is not an emergency. If it had been, you would have been notified immediately. Total coliform bacteria are generally not harmful themselves. *Coliforms are bacteria which are naturally present in the environment and are used as an indicator that other, potentially-harmful, bacteria may be present. Coliforms were found in more samples than allowed and this was a warning of potential problems.*
- Usually, coliforms are a sign that there could be a problem with the system's treatment or distribution system (pipes). Whenever we detect coliform bacteria in any sample, we do follow-up testing to see if other bacteria of greater concern, such as fecal coliform or *E. coli*, are present. **We did not find any of these bacteria in our subsequent testing, and further testing shows that this problem has been resolved.**
- People with severely compromised immune systems, infants, and some elderly may be at increased risk. These people should seek advice about drinking water from their health care providers. General guidelines on ways to lessen the risk of infection by microbes are available from U.S. EPA's Safe Drinking Water Hotline at 1(800) 426-4791.
- If you have other health issues concerning the consumption of this water, you may wish to consult your doctor.

Attachment A

What happened? What was done?

Two of the three routine bacteriological samples collected on August 8, 2017, tested positive for total coliform bacteria. On August 10, 2017, our lab notified the Company and the California State Water Quality Control Board, Division of Drinking Water. On August 11, 2017, Tahoe Park Water Company collected the required repeat samples. No coliform bacteria was detected in any of the four repeat samples. Tahoe Park Water Company operators also investigated the water system for possible sources of contamination and none were found. Once again, no E. coli was detected in any of the samples collected from the Tahoe Park Water Company – Skyland/Nielsen water system during the month of August.

For more information, please contact Rick Dewante at 530-583-3938 or 5000 Windplay Drive, Suite 4 El Dorado Hills, CA 95762.

Please share this information with all the other people who drink this water, especially those who may not have received this notice directly (for example, people in apartments, nursing homes, schools, and businesses). You can do this by posting this public notice in a public place or distributing copies by hand or mail.

Secondary Notification Requirements

Upon receipt of notification from a person operating a public water system, the following notification must be given within 10 days [Health and Safety Code Section 116450(g)]:

- SCHOOLS: Must notify school employees, students, and parents (if the students are minors).
- RESIDENTIAL RENTAL PROPERTY OWNERS OR MANAGERS (including nursing homes and care facilities): Must notify tenants.
- BUSINESS PROPERTY OWNERS, MANAGERS, OR OPERATORS: Must notify employees of businesses located on the property.

This notice is being sent to you by the Tahoe Park Water Company

State Water System ID#: 31100049. Date distributed: _____.

Attachment B
COMPLIANCE CERTIFICATION

Citation Number: **01-02-17C-018**

Name of Water System: **Tahoe Park Water Company – Skyland/Nielsen**

System Number: **3110049**

As required by Section 116450 of the California Health and Safety Code, I certify that the users of the water supplied by this water system were notified of the bacteriological monitoring violation which occurred during August 2017. In addition, I certify that Tahoe Park Water Company has complied with the directives of this citation as indicated below:

<u>Required Action</u>	<u>Date Completed</u>
Public notification via direct delivery, as required by Directive 3	_____
Public notification via posting in conspicuous places within the distribution system, as required by Directive 3	_____
Complete Level 1 Assessment Form, as required by Directive 2	_____
_____	_____
Signature of Water System Representative	Date

Attach a copy of the notice.

**THIS FORM MUST BE COMPLETED AND RETURNED TO THE DIVISION NO LATER THAN
November 20, 2017.**

Disclosure: Be advised that Section 116725 and 116730 of the California Health and Safety Code states that any person who knowingly makes any false statement on any report or document submitted for the purpose of compliance with the attached order may be liable for a civil penalty not to exceed five thousand dollars (\$5,000) for each separate violation for each day that violation continues. In addition, the violators may be prosecuted in criminal court and upon conviction, be punished by a fine of not more than \$25,000 for each day of violation, or be imprisoned in county jail not to exceed one year, or by both the fine and imprisonment.

STATE OF CALIFORNIA
WATER RESOURCES CONTROL BOARD
DIVISION OF DRINKING WATER



RTCR Level 1 Assessment Report Form for Positive Total Coliform Investigation

See the RTCR Level 1 Assessment Guidance and Tips document for additional information.

This assessment is intended to review general water system infrastructure, system operation and sampling protocols for potential sources of contamination. This form should be completed by a knowledgeable representative of the water system. To avoid a violation, an assessment report must be completed and returned to your local regulatory agency no later than 30 days after the trigger date.

SYSTEM NAME: Tahoe Park- Skyland/Nielsen	Trigger Date: September 10, 2017
SYSTEM #: 3110049	Investigation Date:

#	Issues	Yes/No	N/A	Potentially	If Yes or Potentially, Identify
1	Unusual occurrences with the water system since the last negative routine bacteriological sample:				
	Loss of pressure <5 psi	Y <input type="checkbox"/> N <input type="checkbox"/>		<input type="checkbox"/>	
	Heavy precipitation and/or flooding	Y <input type="checkbox"/> N <input type="checkbox"/>			
	Customer complaints of water quality or pressure	Y <input type="checkbox"/> N <input type="checkbox"/>			
	Evidence of unauthorized access/vandalism	Y <input type="checkbox"/> N <input type="checkbox"/>			
	Interruption in disinfection treatment	Y <input type="checkbox"/> N <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2	Changes to water system since last negative routine bacteriological sample:				
	Piping modified or repaired	Y <input type="checkbox"/> N <input type="checkbox"/>			
	System components replaced or repaired	Y <input type="checkbox"/> N <input type="checkbox"/>			
	Changes in operational procedures or personnel	Y <input type="checkbox"/> N <input type="checkbox"/>		<input type="checkbox"/>	
3	Groundwater source contamination:		<input type="checkbox"/>		
	Repeat bacteriological sample(s) from raw source water is positive for total coliform	Y <input type="checkbox"/> N <input type="checkbox"/>			
	Wells:		<input type="checkbox"/>		
	Cracks or holes in the well casing above grade	Y <input type="checkbox"/> N <input type="checkbox"/>		<input type="checkbox"/>	
	Water can leak through well top seal	Y <input type="checkbox"/> N <input type="checkbox"/>		<input type="checkbox"/>	
	The well is not equipped with a downturned screened vent.	Y <input type="checkbox"/> N <input type="checkbox"/>			
	Water can leak through well head penetrations for electrical or sounding equipment	Y <input type="checkbox"/> N <input type="checkbox"/>			
	Leaking pipes or standing water around the well(s)	Y <input type="checkbox"/> N <input type="checkbox"/>			

	Springs and/or Horizontal Wells:		<input type="checkbox"/>		
	The collection site is overgrown with vegetation.	Y <input type="checkbox"/> N <input type="checkbox"/>			
	Flowing/standing water around the collection site	Y <input type="checkbox"/> N <input type="checkbox"/>			
	Evidence of animal activity around the collection site (grazing/burrowing)	Y <input type="checkbox"/> N <input type="checkbox"/>		<input type="checkbox"/>	
	Rodents, insects or roots in the spring box	Y <input type="checkbox"/> N <input type="checkbox"/>	<input type="checkbox"/>		
5	Tank(s) storage, clearwell, backwash return:		<input type="checkbox"/>		Proceed to section 6 if there are no tanks.
	Openings in tank roof that rain water can enter	Y <input type="checkbox"/> N <input type="checkbox"/>		<input type="checkbox"/>	
	Rodents, birds, insects or other unexpected materials inside tank	Y <input type="checkbox"/> N <input type="checkbox"/>			
	Tank air vents are not properly screened to prevent insects from entering.	Y <input type="checkbox"/> N <input type="checkbox"/>			
	Hatches or access ladders left unlocked	Y <input type="checkbox"/> N <input type="checkbox"/>			
	For redwood tanks, signs of birds/animals burrowing or nesting into the tank	Y <input type="checkbox"/> N <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	root intrusion, for underground tanks	Y <input type="checkbox"/> N <input type="checkbox"/>	<input type="checkbox"/>		
6	Distribution system				
	Low pressure transmission lines	Y <input type="checkbox"/> N <input type="checkbox"/>			
	Dead end lines	Y <input type="checkbox"/> N <input type="checkbox"/>			
	Interties with non-potable water systems or sources (even if valved off)	Y <input type="checkbox"/> N <input type="checkbox"/>		<input type="checkbox"/>	
	Any certified backflow prevention devices not tested in the previous calendar year.	Y <input type="checkbox"/> N <input type="checkbox"/>	<input type="checkbox"/>		
7	Sample site and sampling procedures				
	Sample sites are not the ones identified in the approved bacteriological sample siting plan.	Y <input type="checkbox"/> N <input type="checkbox"/>			
	Sample taps are wet, leaking or dirty	Y <input type="checkbox"/> N <input type="checkbox"/>			
	The sample collector was not properly trained	Y <input type="checkbox"/> N <input type="checkbox"/>		<input type="checkbox"/>	
	Is there a seasonal pattern in positive samples when reviewing historical monitoring?	Y <input type="checkbox"/> N <input type="checkbox"/>			
8	Other	Y <input type="checkbox"/> N <input type="checkbox"/>		<input type="checkbox"/>	

SUMMARY: Based on the results of your investigation and any other available information, list the deficiencies found that could be the source of contamination resulting in the positive total coliform samples from your water system? Also, include any deficiencies that could potentially lead to contamination. (REQUIRED)

Deficiency #	Deficiency Description

CORRECTIVE ACTIONS: What actions have you taken to correct the identified deficiencies? If additional time is needed to correct a deficiency, indicate a correction date or contact your local regulating agency for a reasonable timeline for correction. (REQUIRED)

Deficiency #	Corrective Action	Date Completed

CERTIFICATION: I certify that the information submitted in response to the questions above is accurate to the best of my knowledge.

Name: _____ Title: _____ Signature: _____ Date: _____